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DJ Bogorodsky

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In re: application of: James F. Robertson
Application Number: 10/043,653
Filed: January 9, 2002
Title: Fluid Agitator and Conditioner
Atty Docket Number: 015490-000000US WJB/djb

Being faxed to Examiner - Tony Glen Soohoo Group 1723 at facsimile number
1-703-872-9310 are the following documents:

This PTO/SB/97 Certificate of Transmission (1 page);
PTO/SB/21 Transmittal Form (1 page); and
Amendment (7 pages)

Number of pages being transmitted: 9

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PTO/SB/21 (05-03)

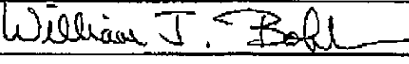
**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

		Application Number	10/043,653
		Filing Date	January 9, 2002
		First Named Inventor	James F. Robertson
		Art Unit	1723
		Examiner Name	Tony Glenn Soohoo
Total Number of Pages in This Submission	9	Attorney Docket Number	015490-000000US

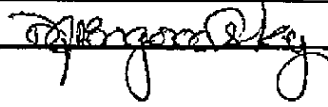
ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (7pgs) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO/SB/97 Certificate of Transmission (1 pg) this PTO/SB/21 Transmittal Form (1 pg)
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

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